



PTO/SB/82 (04-05)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/624,470
	Filing Date	July 23, 2003
	First Named Inventor	Ming-Chiao HO
	Art Unit	2114
	Examiner Name	LE, DIEU-MINH T
	Attorney Docket Number	N/A

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed.**SIGNATURE of Applicant or Assignee of Record**

Signature

Name Date

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



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